

STATEMENT OF ECONOMIC INTERESTS

RECEIVED

Date Received

JAN 28 2011

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COVER PAGE  
FAIR POLITICAL  
PRACTICES COMMISSION

DANVILLE CITY CLERK

Please type or print in ink.

NAME OF FILER (LAST) Andersen (FIRST) Candace (MIDDLE) Kay

1. Office, Agency, or Court

Agency Name

Town of Danville

Division, Board, Department, District, if applicable

Your Position

Council Member

► If filing for multiple positions, list below or on an attachment.

Agency: Traffix (Measure J Congestion Relief)

Position: Alternate Board Member

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☒ County of Contra Costa

☒ City of Danville

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-  
The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 2

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

MAILING ADDRESS STREET CITY STATE ZIP CODE

Date Signed 1/26/11  
(month, day, year)

Signature

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**  
 Name  
Candace J. Kay Andersen

▶ 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

NAME OF LENDER\*

INTEREST RATE

**TERM (Months/Years)**

ADDRESS (Business Address Acceptable)

\_\_\_\_\_ % ☐ None

SECURITY FOR LOAN

☐ None ☐ Personal residence

**BUSINESS ACTIVITY, IF ANY, OF LENDER**

☐ Real Property \_\_\_\_\_ *Street address*

City

HIGHEST BALANCE DURING REPORTING PERIOD

☐ Guarantor☐ Other \_\_\_\_\_ (Describe) \_\_\_\_\_☐ \$500 - \$1,000☐ \$1,001 - \$10,000☐ \$10,001 - \$100,000☐ OVER \$100,000

Comments: \_\_\_\_\_